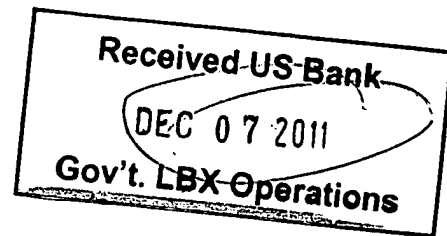


Attn;
US Patent & Trademark Office
12/5/2011



Director of the US Patent & Trademark Office
Patent # 5915641
Application 08325549

Check # 8210

Enclosed is a check for \$75.00 and a copy of a letter sent on 5/18/2011 in regards to the 11 ½ year maintenance fee.....Upon inquiry it was revealed that my patent had expired even though the Checks were cashed and paperwork was received in your system . In conversations with Armesh Krishnamurthy (571-272-4914) it was determined that the \$75.00 fee would resolve the situation and my patent would not come up as expired.

Thank you for your cooperation

A handwritten signature in cursive script, appearing to read "Dan Barberg".

Dan Barberg /Inventor/ CEO
Reel-A-Pail Inc
11084 15th St SW
Cokato MN 5532
800-450-6507
800-450-6506 fax
reelapail@quickwinder.com email

12/12/2011 DALLEN 00000003 5915641

01 FC:1599

75.00 0P

ATTN;
OFFICE OF PETITIONS

5/18/11

fax # 571-273-8300

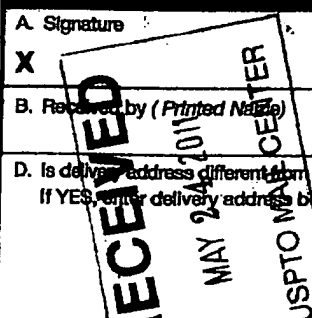
Director of the US Patent and Trademark Office,

Patent # 5915641
Application # 08325549..

I went online to pay my 11 ½ year maintenance fee and received a screen saying it had expired. I inadvertently missed a payment date in 2007 and proceeded to file a petition to accept a delayed payment of maintenance fees on 6/16/2009 and accompanied a check (# 7724) in the amount of \$2880 to pay for the fees and an extra few pounds of flesh. Upon inquiry and a conversation with one of your petition attorneys, Doug Wood, it was revealed that the check was cashed but the paper work was lost and I should fax and send a copy of the petition sent in 2007. I am faxing this and will send a copy and a check for \$2055.00, the 11 ½ year fee via the USPO and make a follow up call to verify that you have received the paper work.

Awaiting your response,

Daniel A Barberg /Inventor/CEO
Reel-A-Pail Inc
11084 15th st SW
Cokato MN 55321
800-450-6507
800-450-6506 fax
reelapail@quickwinder.com

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		<p>A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
1. Article Addressed to: <i>Ria of the USPTO mail stop Belition- PO BOX 1450 Alexandria VA 22313-1450</i>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7007 1490 0002 7744 4826	